Grant Delivery System (GDS) - WebGrants District System Administrators Access Request Form



How to fill out the System Administrator's Access Request Form

This form is required for the District System Administrator (SA). This form must be certified by the (Authorized Official-AO) and returned to the Commission.

I. District Section:

 Fill in the District name, address, city, state, and Zip Code, CDS code and WASC Accreditation and/or Accreditation Association Contact information.

II. Personal Information Section:

- Enter the last name, first name, and middle initial of the System Administrator requesting access.
- The requesting System Administrator must provide a unique alpha-numeric answer to the Question (Q&A) selected. The answer must be at least 5 characters and no more than 9 characters. The **Password Reset / Assistance** Q&A, will be used by the IT Help Desk to verify the identification of the SA needing support. Special Identifiers may be your pet's name, your favorite food or the model of your/their first car. When calling the IT Help Desk for assistance, you must provide your Password Reset Answer. Support for GDS WebGrants will NOT be provided without this confirmation.
- The System Administrator must sign the form and certify that all security and confidentiality policies have been received and reviewed.

III. Access Request and District Certification Section:

- Provide the date the form was completed.
- Select/Check the appropriate check box based on the type of action the Commission should complete.
 - New access Once approved and processed, the Password will be e-mailed to the Authorized Official. The System Administrator will receive a User ID and a link to User account page by e-mail. The SA will need to get the Pass Code from the AO.
 - Renew Used for the annual renewal process. This form and the Security and Confidentiality Agreement must be submitted every two years for continued access to the GDS – WebGrants system. Failure to submit the forms may result in the SA and all subordinate Institutional user accounts to be deactivated.
 - o Change or add School Used for existing accounts. If you have changed schools or need to add a school.
 - Delete access Required to be submitted when any SA or AO no longer perform the duties for the Institution either by reassignment, dismissal, transfer, retirement, or other.
- Enter the name, title, telephone number, facsimile number and e-mail address of the Authorized Official verifying this
 request.
- The Authorized Official MUST sign the form.

NOTE: The Authorized Official (AO) and System Administrator (SA) may not be the same person.

Mail forms to:

California Student Aid Commission
Program Administration Services Dept.
Attn: Adrian Felix
P.O. Box 419027
Rancho Cordova, CA 95741-9027

Retain a copy of this completed forms.

Do NOT include or send this information page with Confidentiality Agreement.

Grant Delivery System (GDS) - WebGrants District System Administrators Access Request Form



A signed CSAC - Information Security and Confidentiality Agreement must be received and approved by the California Student Aid Commission prior to gaining access to the GDS - WebGrants. All fields are required to obtain a System Administrator's (SA) User ID and Password. System Administrators & Authorized Officials (AO) must renew/submit this form every two years.

I. District School Sec	tion				
District Name					
District Address			City		
2100110011001			City		
			State	Zip Code	
List Public High Schoo	ls in your D	istrict on the next page	State	Zip Code	
		. •			
II. Personal Informati	on Section	on (to be completed by pers	on requesting access)		
Name of System Adminis	trator (Last	, First, Middle Initial):	Mailing Address for SA (if	other tha	n listed above):
Password Reset / Assista	nce Questi	on and Answer (Check only one	· -	c characte	ers):
Question: Your	pet's name	e	Answer:		
Your	favorite foo	od			
Mode	el of your fi	rst car (e.g., Mustang)			
I certify that I have re	eceived a	and reviewed all security	and confidentiality poli	cies pe	ertaining to the
		S - WebGrants systems a			9 10 1110
Signature - System Administ	trator (SA) *		Title / Position		Date
E-Mail Address (maximum of 4	0 characters) (ca	n not be personal email)	Phone Number	Fax Nu	imber
			1		
III. Access Request and	d District (Certification Section <i>(to be d</i>	completed by Superintent	endent	verifving access)
Date Request Submitted:		The SA Account is created and re Security and Confidentiality Agre			
		the SA and all subordinate account			•
New	Renew	Change*	Disable	User II	O or Name
Please select only	one. If you a	re requesting to disable, you do not	t need to attach the Security and	Confident	iality Agreement.
		ndent and I have designated tor and I have reviewed all s			
their use.	lullillistia	tor and i nave reviewed all s	security and confidential	ty polici	es pertaining to
Signature of Superintendent	(AO) *		Print Name of Superintendent		Date
E-Mail Address (maximum of 40 c	haracters) (can i	not be personal email)	Phone Number	Fax Nu	ımber
****	1 5:				0
		ict, one who is the Superintendent and the em Administrator will have the authori			
Superintendent will not.	/ - /		, , , , , , , , , , , , , , , , , , , ,		1/

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List of Public High Schools in your County Attach additional pages, if necessary.

High School Name	College Board code	CDS Code	ASC Accreditation Code (or other eligible regional accreditation code)	Accreditation Association Contact (if other than WASC)

Grant Delivery System (GDS) - WebGrants District Information Security and Confidentiality Agreement



Policy:

The California Student Aid Commission (the Commission) and the District have a joint responsibility to protect the integrity and confidentiality of the data in the Commission's database. This is vital to the privacy of individual students. The GDS - WebGrants system must be maintained in a legal and ethical manner.

Article 1, Section 1, of the Constitution of the State of California defines pursuing and obtaining privacy as an inalienable right.

The District must:

- A. dentify two authorized individuals at the district, one who is the Superintendent (acting as Authorized Official) and one who will act as System Administrator. You may identify up to two System Administrators. The System Administrator is to be designated by the Authorized Official. The System Administrator will have the authority and ability to add or disable individual users at the District location; the Superintendent (AO) will
- Complete, sign and submit an Information Security and Confidentiality Agreement and a System Administrator's Access Request Form. Both forms must be approved by the Commission prior to the District gaining access to the GDS – WebGrants System.
- Notify the Commission in writing within five (5) working days if the identity of the District System Administrator(s) or Superintendent (AO) changes. If a new Superintendent (Authorized Official) is appointed: A new agreement must be completed immediately and submitted to the Commission. If a new System Administrator is designated, a new Agreement designating the new AO and a new System Administrator's Access Request Form must be completed immediately and submitted to the Commission.
- Establish administrative, technical and physical safeguards to protect the security and confidentiality of records, data and system access.
- Immediately disable the account of any individual who ceases employment or whose change in employment status or duties no longer requires access to the GDS - WebGrants.
- Notify the Commission immediately of any security or confidentiality violation(s) by contacting the Commission's ITS Help Desk at 888.294.0148.
- Establish training programs and acceptable use policies for District employees regarding information security and confidentiality, which includes Commission data. All users must receive security training upon creation and annual renewal of accounts. (See WebGrants site) Retain a copy of the Information Security and Confidentiality Agreement and a copy of all past / current System Administrator's Access Request Forms. High schools are responsible for maintaining the names of all additional system users at their campus.
- H. The System Administrator account is created and renewed for two years from the activation date. Prior to your renewal d ate, a new System Administrators Access Request form and the Security and Confidentiality Agreement must be submitted to the Commission to obtain or renew system access. If forms are not submitted to the Commission in a timely manner, the OA, SA and all subordinate accounts will be disabled for the high school(s).

NOTE: The Gi dYf]bhYbXYbh(AO) and System Administrator fG5 ŁMust not be the same individual.

Definitions:

California Student Aid Commission. Commission:

Authorized Official: Individual authorized by the Institution to execute the Information Security and Confidentiality Agreement on behalf of

the high school.

System Administrator: Individual designated by the Authorized Official to be responsible for implementing procedures and ensuring adherence

to all information security/confidentiality policies stated herein. The high school may use their existing ISO or they may designate a Financial Aid Office employee to act as the SA for purposes of the Commission's Grant Delivery System -

WebGrants. Each high school may designate two System Administrators.

Information that identifies or describes an individual including, but not limited to, his or her name, social security Confidential Information:

number, physical description, home address and telephone number, education, financial matters, medical or

employment history, including statements made by or attributed to the individual.

Mail forms to:

California Student Aid Commission **Program Administration Services Division** Attn: Adrian Felix P.O. Box 419027 Rancho Cordova, CA 95741-9027

Retain a copy of this completed form.

Do not include or send this informational page with Confidentiality Agreement.

California Student Aid Commission Information Security and Confidentiality Agreement



The Information Security and Confidentiality Agreement is required by the California Student Aid Commission (Commission) from any person or entity (high school, post-secondary educational institution, agent, program, or 3rd party) requesting access to a Commission information technology system.

Security and Confidentiality Agreement:

The California Student Aid Commission (Commission) is committed to protecting the confidentiality and security of information. As an individual requesting access to a Commission application, database, or information technology system, during the course of my duties or purpose at the Commission, I may have access to proprietary or confidential information. I understand that all proprietary and personally identifiable information (collectively PII) must be maintained confidentially, and in a secure fashion.

I agree to follow all Commission policies and procedures governing the confidentiality and security of PII in any form, including oral, fax, photographic, written, or electronic. I will regard both confidentiality and security as a duty and responsibility while part of the Commission workforce, or during my involvement with Commission as a non-workforce member.

I agree that I will not access, release, or share PII, except as necessary to complete my duties or purpose at the Commission. I understand that I may not access any information on friends or family members unless a Release of Information form authorizes me to do so, unless doing so is a necessary part of my job duties, or unless I am otherwise permitted to do so by Commission policies. I understand that I am not authorized to use or release PII to anyone who is not part of the Commission workforce or an approved visiting observer or Commissioner except as provided in Commission policies and procedures, contract, or as required by law.

I agree that I will use all reasonable means to protect the security of PII in my control, and to prevent it from being accessed or released, except as permitted by law. I will use only the access privileges I have been authorized to use, and will not reveal any of my passwords, user account identifiers (IDs), or share access with others. I will take precautions to avoid inadvertently revealing PII; for example, I will use workstations in a safe manner and will make reasonable efforts to prevent conversations from being overheard, including speaking in lowered tones and not discussing PII in public areas. If I keep Commission related data and notes on a handheld or laptop computer or other electronic device, I will ensure that my supervisor knows of and has approved such use and I will keep this information secure and confidential. If, as part of my responsibility, I must take PII off the premises, I will do so only with permission from my supervisor; I will protect PII from disclosure; and will ensure that the PII is either returned to Commission or destroyed.

I agree that when my employment, affiliation, visitation or assignment with Commission ends, I will not take any PII with me and I will not reveal any PII that I had access to as a result of my duties at the Commission. I will either return PII to the Commission or destroy it in a manner that renders it unreadable, unusable by anyone else and in accordance with Commission security and confidential destruct policy.

I agree to report unauthorized use or disclosure of PII or security issues affecting systems that contain or give access to PII, to the California Student Aid Commission Information Security Office, P.O. Box 419026 Rancho Cordova, CA 95741-9026; Email: iso@csac.ca.gov and csac.ca.gov, IT Help Desk: 888-294-0148 Fax 916-464-6430.

I understand that access to all Commission systems is monitored. There is no reasonable expectation of privacy expressed or implied in my usage of Commission information systems. My usage of all Commission systems will comply with all federal and California information security and confidentiality laws, including the Comprehensive Computer Data Access and Fraud Act (California Penal Code Section 502), Federal Privacy Act, Gramm-Leach-Bliley Act with subsequent "Privacy" and "Safeguards" rulings, the Information Practices Act of 1977, as amended and the Commission's security and confidentiality policies and procedures. Any and all unauthorized access is prohibited.

I understand that if I do not keep PII confidential, or if I allow or participate in inappropriate disclosure or access to PII, I will be subject to immediate disciplinary or corrective action, up to and including dismissal or loss of access privileges to Commission property and facilities. I understand that unauthorized access, use, or disclosure of PII may also violate federal and state law, and may result in criminal and civil penalties.

THIS AGREEMENT WILL REMAIN IN FULL FORCE AND EFFECT UNTIL IT IS EITHER RESCINDED OR THE REQUESTOR'S DUTIES OR RELATIONSHIP WITH THE COMMISSION ARE CHANGED OR TERMINATED. NON-COMPLIANCE WITH THIS AGREEMENT MAY RESULT IN ADVERSE ACTION INCLUDING POSSIBLE TERMINATION OF EMPLOYMENT, CONTRACT, AGREEMENT AND/OR CRIMINAL AND CIVIL PENALTIES UNDER LOCAL, STATE, AND FEDERAL LAWS.

(SA) Name (Last, First, Middle Initial):	First College Board C	ode: User ID:(1)	User ID:(leave blank if unknown)	
District Name:	City:	State:	Zip Code:	
E-Mail Address (maximum of 40 characters):	Phone Number	Fax Numbe	Fax Number	
Student Aid Commission (CSAC). I will comply	, reviewed, and understand the Information Security ar with these policies while using any Commission infor	mation system.	es of the Californ	
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